

## **BILLING CODE 4140-01-P**

## **DEPARTMENT OF HEALTH AND HUMAN SERVICES**

**National Institutes of Health** 

Submission for OMB review; comment request: Ethical Dilemmas in Surgery and Utilization of Hospital Ethics Consultation Service: A Survey

SUMMARY: Under the provisions of Section 3507(a)(1)(D) of the Paperwork Reduction Act of 1995, the Clinical Center Department of Bioethics, the National Institutes of Health has submitted to the Office of Management and Budget (OMB) a request to review and approve the information collection listed below. This proposed information collection was previously published in the <u>Federal Register</u> on November 28, 2011 on page 72955 – 72956 [FR DOC # 2011-30548] and allowed 60-days for public comment. Two comments were received by the NIH Department of Bioethics. The comments we received included one request from a survey firm that was interested in possibly administering the survey, and one request from the American Association of Medical Colleges (AAMC) that was interested in knowing what items were in the survey instrument. The purpose of this notice is to allow an additional 30 days for public comment. . The National Institutes of Health may not conduct or sponsor, and the respondent is not required to respond to, an information collection that has been extended, revised, or implemented on or after October 1, 1995, unless it displays a currently valid OMB control number.

PROPOSED COLLECTION: <u>Title:</u> Ethical Dilemmas in Surgery and Utilization of Hospital Ethics

Consultation Service: A Survey. <u>Type of Information Collection Request:</u> NEW. <u>Need and Use of Information Collection:</u> This survey is intended to collect information about the ethical dilemmas that

surgeons have faced in their practices over the past year, and assess their experiences, if any, with their hospital consultation services. Specifically, the information gathered in this study will be valuable in understanding the ethical dilemmas that surgeons face, the utility of institution ethics consultations services for surgeons, and to identify what barriers, if any, discourage surgeons from utilizing these services. The results of this study can be used by medical professionals, hospitals, and bioethicists in several important ways. First, they will provide a better understanding the ethical dilemmas that surgeons face in their practices. Second, they will provide understanding of factors that determine the current utilization of hospital consultation services by surgeons. Third, information collected on the barriers to surgeons' use of ethics consultation services will provide better insight into the perspective and culture of surgery as it relates to ethical dilemmas in their practices and how ethics consultation services could better support surgeons when faced with these dilemmas. Frequency of Response: Once. Affected Public: Individuals; Businesses or other for-profit. Type of Respondents: Individuals.

The annual reporting burden is as follows:

Type of Respondents	Estimated Number of Respondents	Estimated Number of Responses per Respondent	Average Burden Per Response (in hours)	Estimated Total Annual Burden Hours Requested
Surgeons	598	1	15/60	150
Total	598			150

There are no capital, operating, or maintenance costs to report.

**REQUEST FOR COMMENTS:** Written comments and/or suggestions from the public and affected agencies are invited on one or more of the following points: (1) Whether the proposed collection of information is necessary for the proper performance of the function of the agency, including whether

the information will have practical utility; (2) The accuracy of the agency's estimate of the burden of the

proposed collection of information, including the validity of the methodology and assumptions used; (3)

Ways to enhance the quality, utility, and clarity of the information to be collected; and (4) Ways to

minimize the burden of the collection of information on those who are to respond, including the use of

appropriate automated, electronic, mechanical, or other technological collection techniques or other

forms of information technology.

**DIRECT COMMENTS TO OMB:** Written comments and/or suggestions regarding the item(s) contained in

this notice, especially regarding the estimated public burden and associated response time, should be

directed to the: Office of Management and Budget, Office of Regulatory Affairs,

OIRA submission@omb.eop.gov or by fax to 202-395-6974, Attention: Desk Officer for NIH. To request

more information on the proposed project or to obtain a copy of the data collection plans and

instruments, contact: Marion Danis, MD, Department of Clinical Bioethics, National Institutes of Health,

Building 10, Room 1C118, Bethesda, MD 20892-1156; Telephone: 301.435.8727; Facsimile:

301.496.0760; Email: mdanis@cc.nih.gov

COMMENTS DUE DATE: Comments regarding this information collection are best assured of having their

full effect if received within 30-days of the date of this publication.

Dated: August 28, 2012

Laura Lee,

Project Clearance Liason, CC

National Institutes of Health

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